

FEE WAIVER

Educational Study at Lava Beds National Monument



Name and address of institution:

Phone: _____ Dates of visit: _____ to _____

Number in group: _____ Number of vehicles: _____ Age/Grade: _____

Subject being studied: _____

Instructor Name: _____

- Please mail complete form to: **Lava Beds National Monument, 1 Indian Well Headquarters, Tulelake, CA 96134** If accepted, a signed copy will be mailed back to the address you listed above.
- You should have a copy of your proof of accreditation and/or your planned course of study while at Lava Beds National Monument.
- Upon receipt of the approved form, make copies for each of the vehicles in your group, and be sure to bring them with you.
- If you have any questions, feel free to contact us at 530-667-8100
- This fee waiver is for entrance fees only. All other fees, including camping fees, must also be paid.

Instructor's signature: _____ Date: _____

National Park Service Approval

Superintendent Signature: _____

Date: _____

Requires signature to be valid.